24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
MeidasTouch	
	C C00746073
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
J & Z Strategies	M M / D D / Y Y Y Y
Mailing Address 5419 Hollywood Blvd	11 18 2020 Amount
Ste C135	
City State Zip Code	99595.71
Los Angeles CA 90027-3480	Transaction ID: 500003781 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad Buy Category/ Type	11 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 00
LOEFFLER, KELLY, , ,	President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disbu	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	99595.71
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	99595.71
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
· Duto	1 18 2020
Signature	